

| POSITION                  | INITIALS  | ID NO.   | DATE            |
|---------------------------|-----------|----------|-----------------|
| FEE DETERMINATION         | <i>TR</i> |          | <i>10-30-00</i> |
| O.I.P.E. CLASSIFIER       | <i>RV</i> | <i>3</i> | <i>11/15</i>    |
| FORMALITY REVIEW          |           |          |                 |
| RESPONSE FORMALITY REVIEW |           |          |                 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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